

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

| | | | |
|---|----------------|-----------------------------------|------------------------|
| Effective on 12/08/2004. <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i> | | Complete if Known | |
| FEES TRANSMITTAL | | Application Number | 09/892,769-Conf. #3442 |
| For FY 2009 | | Filing Date | June 28, 2001 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | First Named Inventor | Yoshiki KAWAOKA |
| | | Examiner Name | G. Araque |
| | | Art Unit | 3689 |
| TOTAL AMOUNT OF PAYMENT | (\$) 540.00 | Attorney Docket No. 3562-0118P | |

METHOD OF PAYMENT (check all that apply)

| | | | | |
|---|--------------------------------------|--------------------------------------|-------------------------------|--|
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account | | Deposit Account Number: 02-2448 | | Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP |

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

| | |
|--|---|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments |

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> | | <u>SEARCH FEES</u> | | <u>EXAMINATION FEES</u> | | <u>Fees Paid (\$)</u> |
|-------------------------|--------------------|--|--------------------|--|-------------------------|--|-----------------------|
| | <u>Fee (\$)</u> | <u>Small Entity</u> <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity</u> <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity</u> <u>Fee (\$)</u> | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEESFee Description

| | | | |
|--|--|-----|-----|
| Each claim over 20 (including Reissues) | <u>Small Entity</u> <u>Fee (\$)</u> | 52 | 26 |
| Each independent claim over 3 (including Reissues) | | 220 | 110 |
| Multiple dependent claims | | 390 | 195 |

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> |
|---------------------|---------------------|-----------------|----------------------|--------------------------------------|
| - or HP = | x | = | | <u>Fee (\$)</u> <u>Fee Paid (\$)</u> |

HP = highest number of total claims paid for, if greater than 20.

| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|----------------------|
| - or HP = | x | = | |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

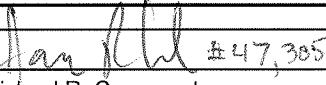
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|
| - 100 = | /50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1401 Notice of appeal \$540.00

| | | | |
|---------------------|--|--|---|
| SUBMITTED BY | | | |
| Signature |  #47,305 | | Registration No. (Attorney/Agent) 39,491 |
| Name (Print/Type) | Michael R. Cammarata | | Telephone (703) 205-8000 |
| | | | Date February 4, 2010 |